## **MACOMB TOWNSHIP**

54111 Broughton Road • Macomb, MI 48042 • 586-992-0710 x 4



## APPLICATION PACKET

## **FOR**

## REZONING

#### **APPLICANTS TAKE NOTICE OF THE FOLLOWING:**

All applications must contain <u>each and every page</u> from this application packet, including the checklist and any unused pages. If your application does not include all items, it will not be received by the Clerk's Office.

Please use only the forms provided with this application. <u>No other forms</u>, however similar, will be accepted.

The information contained herein represent requirements contained in the Macomb Township Zoning Ordinance #10.

# Michael D. Koehs, CMC Township Clerk

#### CHECKLIST OF DOCUMENTS REQUIRED FOR REZONING APPLICATION

Please place a check mark in the box next to each item as you assemble the following required information.

When complete, submit the completed application package to the Macomb Township Clerk's Office. One (1) completed Rezoning Application form, found on page 3. This application must be dated, signed and submitted to the office of the Township Clerk. Payment of \$1,450.00, plus \$20.00 for each additional acre over two (2) acres. Please make your check payable to 'Macomb Twp. Treasurer' (Funds are non refundable). One (1) written explanation for the Rezoning request. You may use the Documentation Supporting the Request form, found on page 4. You may wish to attach a separate letter of explanation if the space provided is not sufficient. One (1) original copy of the Affidavit of Ownership form, found on page 5. Two (2) copies of proof of interest in the land (i.e. Deed, Land Contract, Option/Purchase Agreement, etc.) One (1) completed Verification of Recorded Legal Property form, found on page 6. (Applicant must have the Township Assessor verify the Legal Description by signing this document). One (1) original fine-line, black-ink drawing on 8½" X 11" paper showing the parcel(s) proposed for rezoning in relation to the nearest streets or U.S. Government section corners. Advisement of availability of water lines and sewer lines to the land. (Please answer the questions listed on the application).

#### **REZONING REVIEW PROCESS**

- **Step 1:** Applicant submits completed application (see checklist to determine if complete)
- **Step 2:** The Planning Commission will hold a Public Hearing on the request. Notices of the hearing will be published in the newspaper, sent to property owners within 300 feet of the subject property, and sent to all registered utility companies.
- **Step 3:** After the Public Hearing, the Planning Commission shall report their recommendation to approve or deny the application to the Board of Trustees.
- **Step 4:** The Clerk's Office shall notify the applicant of the Planning Commission's recommendation.
- **Step 5:** The Township Board of Trustees will hold a second public hearing, notice of which shall be mailed to property owners in the same way as was for the Planning Commission. The hearing will also be published in a local newspaper.
- Step 6: Township Board meets and holds the public hearing. They may act at the same meeting to approve, deny or table the application. Conditions may be imposed on a rezoning application (see Notice # 5 below), if requested in writing by the petitioner.
- **Step 7:** Clerk's Office shall notify the applicant of the Board of Trustee's decision.
- **Step 8:** If approved, a notice of adoption of the rezoning amendment shall be published in the newspaper within 15 days of the Board of Trustee's decision.

#### ALL APPLICANTS TAKE SPECIAL NOTICE OF THE FOLLOWING:

- 1. Attendance Required at Public Hearing. The Macomb Township Planning Commission and Township Board of Trustees require the Applicant or the Applicant's Representative to be present at each Public Hearing; otherwise the item will be tabled to another meeting date.
- 2. Planning Commission Policy Regarding Request To Table. Should the petitioner request the tabling of a scheduled matter, an amount equal to one-half the original fee shall be charged. Said fee shall be remitted to the Township within ten working days of the rescheduling of the matter. If the fees are not paid, the matter shall be withdrawn from the agenda. There is no fee if the item is tabled by the Planning Commission or Township Board.
- **3. Fees.** A fee of \$100.00 per ½ hour shall be charged for meetings with staff or planning consultant.
- **4. Forms.** Please use only the forms provided with this application. <u>No other forms</u>, however similar, <u>will be accepted.</u>
- 5. Notice of Changes in State Law. P.A. 577 of 2004 became effective January 4, 2005 and amended the Township Zoning Act. More commonly known as the "Conditional Zoning Act", this Act was intended to allow land owners to <u>voluntarily</u> offer in writing certain use and development of land as a condition to a rezoning of the land or an amendment to a zoning map. A township shall not require a landowner to offer conditions as a requirement for rezoning. The lack of an offer under subsection (1) shall not otherwise affect a landowner's rights under this act, the ordinances of the township, or any other laws of this state.

### **APPLICATION FOR REZONING**

MACOMB TOWNSHIP PLANNING COMMISSION 54111 BROUGHTON ROAD MACOMB, MICHIGAN 48042 (586) 992-0710 EXT. 4

#### Only Complete Applications Will Be Accepted (PLEASE PRINT OR TYPE)

Permanent Parcel No. 08					
Name of Applicant		Phone			
Address	City	Zip C	Code		
Address of Property					
Applicants' Representative Name:(if different	ent from applicant)	Phone			
Address:					
City:	State:	Zip Code:			
Applicant's Signature					
Location of Property:(For example: the north side of 23 M	lile Road and 1/4 mile east of R	omeo Plank Road)			
Property Frontage (in feet):					
Existing Land Use:					
Current Zoning Classification of Property:	(See Macomb Township Zo	ning Map)			
Requested Zoning Classification:					
Purpose of request to rezone:					
Please answer the following questions:					
If subject rezoning were approved, would the prop		•			
Zoning Ordinance for the parcel without a variance	ee?			No	
Is the subject property served by public water?				No	
Is the subject property served by public sewer?		Yes		No	
Are there:					
Flood Plain(s) on subject property?		Yes		No	
2. Wetland(s)?		Yes		No	
3. Drain(s)? Name of drain(s)		Yes		No	
Does the subject rezoning agree with the Macomb	b Township Master Pla	n? Yes		No	

## **DOCUMENTATION SUPPORTING THE REQUEST**

Name of Project		
Permanent Parcel Number. 08		
Applicant's Name		Phone
Address	City	Zip Code
Applicants' Representative Name:		Phone
Please provide a detailed description of describe in detail the changes made from the or Site Plan Review, list number of employee if any.	original site plan.	For a Certificate of Zoning Compliance
PLEASE ATTACH ANY ADDITIONAL DOCU	MENTATION SUR	PPORTING THIS REQUEST
		Applicant's Signature

#### **AFFIDAVIT OF OWNERSHIP**

PLEASE TAKE NOTICE that an Affidavit of Ownership must be filed with all development and variance applications in Macomb Township. Proof of ownership or interest in the property must be attached (i.e. deed, land contract, option agreement, lease, etc.). This requirement must be fulfilled in order to promptly process your application.

If the applicant is not the f	fee titleholder of the	e subject propertablish the fee	erty, he/she is a purcha	aser according to
(Land contract, option, lease, etc.)	io nococcary to co	tabilott tito too		and doon'd to mave
the subject property receive Towr				
(I), (We),		, the	undersigned fee title o	wner(s) of property
hereinafter referenced, acknowle the attached application for (type of	dge (my) (our) inte	ention and des	sire to have the proper	ty described within
(I), (We) further authorize	(name of applican	t)	as a(n) (recite applica	int's interest in property)
of the property, to process an App				
(name)	(owner)	(name)	(ow	ner)
(name)	(owner)	(name)	(ow	ner)
THIS FORM RELATES TO PRO	PERTY WITH THE	FOLLOWING	PARCEL NUMBER:	
	. — — <sup>-</sup> — —			
STATE OF MICHIGAN				
ss. COUNTY OF MACOMB				
On this day of	, 200_	_, before me	personally appeared	(name of applicant)
to r	me known to be the	person(s) des	scribed in and who exec	cuted the foregoing
instrument and acknowledged tha	ht(he, she, ti	nev)	executed the same	e as(his, her, their)
free act and deed.	(1.5, 5.15, 1	,,		(,,,
		Notary Publ		
			ounty, Michigan	
			sion Expires:	
		Acting in Ma	acomb County, Michigan	า

## VERIFICATION OF RECORDED LEGAL PROPERTY

PROJECT NAME		
Application To Be Filed (check	off)	
□ Variance	□ Tentative Preliminary Plat	□ Sign(s) / Ground Sign
	<ul> <li>□ Final Preliminary Plat</li> <li>□ Preliminary Plan Review</li> <li>□ Final Plan Review</li> <li>□ House Move-on</li> <li>□</li></ul>	□ Certificate of Zoning Compliance □ Other □
ADDRESS OF PARCEL (if available)		
	LEGAL DESCRIPTION (INSERT HERE)	
Do Not Write Below This Line – As Is the property proposed for use prop	sessor's Use Only erly recorded with Macomb Township?	? 🗆 YES 🗆 NO
COMMENTS:		
	Phyllis Sharbo	, Township Assessor